

OFFICE OF THE CITY CLERK City and County of Honolulu Honolulu Hale Honolulu, Hawaii 96813-3077 Telephone: 768-3810

DISCLOSURE OF FINANCIAL INTERESTS

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PUBLIC DISCLOSURE FORM FOR CALENDAR YEAR 2017

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(PRINT	OR TYPE CLEARLY)			1 1 2	₩.
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NAME_	Krishniah N. Murthy	POSITION/EL	ECTIVE OFFICE	Executive Director &	CEO C
DEPAF	TMENT/AGENCY Honolulu Aut	hority for Ra	pid Transporta	ation (HAF	(T)
NAME	of Spouse Mrs. Padmini N. M	Murthy			
0111	to have and fill in any applicable of	aton:			
Check to	ne appropriate box and fill in any applicable da	ates:			
√	INITIAL STATEMENT: Date on which 12/05/16 You must file with interests held during the preceding cale	nin twenty (20) worl	ffice or began employ king days after this dat		
	ANNUAL STATEMENT: You are requifinancial interests held during the prece	red to file not later the	nan January 31 of each y	ear disclosing a	li
	LEAVING OFFICE STATEMENT: You file a statement within ten (10) working during the preceding calendar year.	are leaving or have days of that date. \	left your office on You must disclose finance	and mus cial interests hel	;t d
	CANDIDATE STATEMENT: You must as a candidate for office disclosing intestatement.	t file no later than ter erests held during th	า (10) working days afte e calendar year precedi	r the deadline fo ng the due date	r filing of the
		VERIFICATION			
through	I declare that I have used all reasonablen 9, and to the best of my knowledge the i	e diligence in prepar information provided	ing this form, that I have in this form is true and o	e reviewed Item I correct.	Nos. 1
Date_	anuary 317	Signature	Man.		

GENERAL INSTRUCTIONS

All questions must be answered in regard to yourself, your spouse, and all dependent children. Use Abbreviations:

All items on the form must be completed. If you have no information to disclose under a particular item, check "None". If additional space is required to complete an item, check "Additional sheets attached". Make a copy of your completed financial disclosure form for your records for future reference.

Disclosures need not be made by exact dollar amounts but may be reported by "range of value". You may indicate the value of a reportable interest by using the appropriate letter from the following codes:

A. Less than \$1,000	E. \$50,000 - \$99,999	I. \$300,000 - \$399,999	M. \$700,000 - \$799,999
B. \$1,000 - \$9,999	F. \$100,000 - \$149,999	J. \$400,000 - \$499,999	N. \$800,000 - \$899,999
C. \$10,000 - \$24,999	G. \$150,000 - \$199,999	K. \$500,000 - \$599,999	O. \$900,000 - \$999,999
D. \$25,000 - \$49,999	H. \$200,000 - \$299,999	L. \$600,000 - \$699,999	P. At least \$1,000,000

1. **INCOME.** Only report compensation earned for services rendered equal to \$1,000 a year or more from any employment including, but not limited to, income from the City, retirement, social security, and deferred compensation. Do not report interest, dividends, alimony, property settlements, or child support payments. Individual items of compensation that constitute a portion of the gross income of a business or profession need not be disclosed. Report income from rental property here.

	None		Additional	sheets	attached
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Recipient	Employer/Source	Position/Service Rendered	When	Annual Income
F	HART	Interim Executive Director & CEO	2016	J
F	Consultant/ Advisory Services	Consultant/Advisor	2016	H z
SP	Travel Spring Agency	President	2016	D
		7/20		
	*			

[&]quot;F" for filer

[&]quot;SP" for spouse

[&]quot;DC" for dependent children

[&]quot;JT" for joint interests of the filer and filer's spouse

2.	CREDITORS. Do not report any debts of less than \$3,000. Do not report debts that arise out of retail installment transactions for the purchase of consumer goods, whatever the amount. Do report a secured obligation such as a home mortgage or a car loan. Do report student loans.						
	☐ None ☐ Ad	Iditional sheets attached					
Pe	rson(s) Incurring Debt	Creditor	Original Loan A	Amount Amou	unt Outstanding		
F		MB Dealership	E	D			
JT		Home Mortgage	G	D			
3.	beneficial intere incorporated, reg regulated finand trust, if the fund	OR INTERESTS IN ests having a value of sulated, or licensed to cacial institutions, mutual or trust is disclosed undatable.	\$5,000 or more or equivary on business in Haw insurance policies, or der this item.	al to 10% or more of ow aii. Do not report accoul	mership of businesses nts in federal or state		
	Thomas 1	Business Name and					
	Owner(s)	Address	Nature of Business	Percentage of Interest	Value of Interest		

	es incorporated		or licensed to ca				ast year.	
Owner	ship or Interes	t	Date of Trans	sfer				
positions also incli	as trustee in a ude being a ma s in non-profit o	any business ajority share	s or organizatior holder in a smal	ı, whether or r	not operated for	profit. Fi	directorships, or duciary positions o report fiduciary	
Position	Holder	Nam	e & Address of Organization		Term of	Office	Annual Compensation	
Position Holder President F			ollege of Eng an Alumni As	ineering	1996-pres		None	
			LVENT BUSINE	SS worth \$5,0	00 or more.			
✓ Non	e Addition					I	·	
Holde	r		Name & Address of Business Na		Nature of Business		Value	

CLIENTS PERSONALLY REPRESENTED BEFORE CITY AGENCIES. Only report representation for which you have received compensation during the preceding calendar year. Do not report representation involving ministerial matters. "Ministerial matters" do not require discretionary authority and do not need to be disclosed.										
✓	None	Additional sheets attached								
Repre	esentative		Client	City Age	ency	Nature of Representation				
pe	reasonable manner, such as assessed value. You are not required to report the tax map key number a street address for your personal residence or the personal residence of your spouse or dependentially children; if you choose not to report the tax map key number and street address, identify instead "personal residence."									
	None	Additional	sheets attached	***						
Owner(s)	Тах Мар	Key Number & Stre	Value	Year Obtained					
	No	one in the S	tate of Hawaii		• 11					
	AL PROF nolulu dur en if it is le mber and pendent c tead as "p		ASFERRED. Only rading calendar year. value (as in the cases for your personal choose not to releance."	report real propert For this item, indi e of a gift). You a al residence or th port the tax map	y transferred cate the actua re not require e personal re key number	in the City and County of al amount of the transaction ed to report the tax map ke esidence of your spouse of and street address, identif				
Seller/De	onor Bi	uyer/Donee	Date	Price	Tax Map Ke	ey Number & Street Address				
					В					